12/04/2008 14:49

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Dental Political Action Committee 1111 14th Street, NW ADDRESS (number and street) Suite 1100 Check if different than previously Washington DC 20005 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00000729 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day Х (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the 11 04 2008 Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 10 0 1 2008 10 2008 15 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Dr Roger Triftshauser Type or Print Name of Treasurer Electronically Filed by Dr Roger Triftshauser 12 0.42008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS
Page 2

F	eport Covering the Period: From:	01 2008	To: 0 15 2008
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 Ž008 Y Y		491747.10
	(b) Cash on Hand at Begining of Reporting Period	67316.78	
	(c) Total Receipts (from Line 19)	75837.00	932271.22
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	143153.78	1424018.32
7.	Total Disbursements (from Line 31)	37000.00	1317864.54
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	106153.78	106153.78
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Dental Political Action Committee

Report Covering the Period: From: To: To: To: To: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	46555.00	97650.00
(ii) Unitemized	28340.00	698110.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)	74895.00	795760.24
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	74895.00	795760.24
Transfers From Affiliated/Other Party Committees	220.00	127840.31
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 6. Refunds of Contributions Made	0.00	0.00
to Federal candidates and Other Political Committees	722.00	5222.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	3448.67
8. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	75837.00	932271.22
Total Federal Receipts (subtract Line 18(c) from Line 19)	75837.00	932271.22

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

(i) Federal Share.....

(ii) Non-Federal Share.....

Expenditures.....

Committees.....

Federal Candidates/Committees.....and Other Political Committees.....

26. Loan Repayments Made.....

Individuals/Persons Other

(b) Political Party Committees(c) Other Political Committees

(d) Total Contribution Refunds

(from Schedule H6)

29. Other Disbursements.....

30. Federal Election Activity (2 U.S.C 431(20))(a) Shared Federal Election Activity

(i) Federal Share

With Federal Funds(c) Total Federal Election Activity (add

31. Total Disbursements (add Lines 21(c), 22,

32. Total Federal Disbursements

from Line 31).....

23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

(subtract Line 21(a)(ii) and Line 30(a)(ii)

Lines 30(a)(i), 30(a)(ii) and 30(b))....

Than Political Committees

(such as PACs)

(add Lines 28(a), (b), and (c))

(add 21(a)(i), (a)(ii) and (b))............

II. DISBURSEMENTS

(a) Shared Federal/Non-Federal Activity (from Schedule H4)

(b) Other Federal Operating

22. Transfers to Affiliated/Other Party

Contributions to

24. Independent Expenditure

27. Loans Made.....28. Refunds of Contributions To:

23.

(c) Total Operating Expenditures

21. Operating Expenditures:

of Disbursements Page 4 **COLUMN A COLUMN B Total This Period** Calendar Year-to-Date 0.00 0.00 0.00 0.00 0.00 3158.29 0.00 3158.29 0.00 0.00 37000.00 1287300.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 3514.93 0.00 0.00 0.00 0.00 0.00 3514.93 0.00 23891.32 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 37000.00 1317864.54

37000.00

1317864.54

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	74895.00	795760.24
34.	Total Contribution Refunds (from Line 28(d))	0.00	3514.93
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	74895.00	792245.31
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	3158.29
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	3158.29

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stor for commercial purposes, other than using the i	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Dental Political Action Comm	nittee	
Full Name (Last, First, Middle Initial) Dr Robert C Daby		Date of Receipt
Mailing Address 710 Morris Way City	State Zip Code	1 0 0 6 2 0 0 8 Transaction ID: 7181910
Sacramento	CA 95864-6173	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr John A Maletta		Date of Receipt
Mailing Address 1677 Plum Thicket Ln		10 06 7 2008
City	State Zip Code	Transaction ID: 7181911
West Des Moines	IA 50266-6604	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr M Joan Gillespie		Date of Receipt
Mailing Address # 225523RD 4C N St NW		10 06 7 2008
City	State Zip Code DC 20001-1255	Transaction ID: 7181912
Washington FEC ID number of contributing federal political committee.	DC 20001-1255	Amount of Each Receipt this Period 500.00
Name of Employer self-employed	Occupation dentist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1100.00
TOTAL This Period (last page this line number of	<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each ca	ate schedule(s) ategory of the ummary Page
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold o	r used by any person for the purpose of soliciting contributions olitical committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Dental Political Action C	•	
Full Name (Last, First, Middle Initial) Dr Kevin M Keating		Date of Receipt
Mailing Address 5107 Cashmere Ct		10 06 2008
City Fair Oaks	State Zip Code CA 95628-5	
FEC ID number of contributing federal political committee.	C 33028-3	Amount of Each Receipt this Period 500.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	500.00
Full Name (Last, First, Middle Initial) Dr Janice G Moreno		Date of Receipt
Mailing Address 2515 Poppy Dr		10 06 2008
City Lodi	State Zip Code CA 95242-4	The state of the s
FEC ID number of contributing federal political committee.	C 33242-4	Amount of Each Receipt this Period 500.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	500.00
Full Name (Last, First, Middle Initial) Dr Lindsey Anne Robinson		Date of Receipt
Mailing Address 10384 Alta St	1 0 0 6 2 0 0 8	
City	State Zip Code	Transaction ID: 7182261
Grass Valley FEC ID number of contributing federal political committee.	CA 95945-6	Amount of Each Receipt this Period 300.00
Name of Employer self-employed	Occupation Full Time Practice (>	30 Hrs/week)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	·
SUBTOTAL of Receipts This Page (options		1300.00

SCHEDULE A (FEC FOITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 44 (check only one) X
Any information copied from such F or for commercial purposes, other the NAME OF COMMITTEE (In Full American Dental Political American Dental Politi	•	on for the purpose of soliciting contributions
Full Name (Last, First, Middle In Dr Douglas James Gordon Mailing Address 20 Powder	·	Date of Receipt
City El Sobrante	State Zip Code CA 94803-2621	Transaction ID: 7182262 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer self-employed	Occupation Full Time Prestice (, 20 Ure (usels)	500.00
Receipt For: Primary General Other (specify) ▼	Full Time Practice (>30 Hrs/week) Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle In Dr Gerald Gelfand Mailing Address 4455 La Ba	,	Date of Receipt 1 0 0 6 2 0 0 8
City Tarzana	State Zip Code CA 91356-5042	Transaction ID: 7182264 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation Dental School Faculty	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle In Dr Carol Gomez Summerhays Mailing Address 13234 Polv	, <u> </u>	Date of Receipt
		10 06 2008
City San Diego	State Zip Code CA 92128-1148	Transaction ID: 7182266 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Pag	e (optional)	1500.00
TOTAL This Period (last page this	line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 44 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Dental Political Action Con	ne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr Lisa P Howard Mailing Address 16 Rivers Edge Dr			Date of Receipt
City	State ME	Zip Code	1 0 0 6 2 0 0 8 Transaction ID: 7182268
Kennebunk FEC ID number of contributing federal political committee.	C	04043-7741	Amount of Each Receipt this Period 750.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼		e Practice (>30 Hrs/week) e Year-to-Date 750.00	1
Full Name (Last, First, Middle Initial) Dr Jonathan David Shenkin Mailing Address 654 Kenduskeag Ave			Date of Receipt
City	State ME	Zip Code	1 0 0 6 2 0 0 8 Transaction ID: 7182269
Bangor FEC ID number of contributing federal political committee.	C	04401-7602	Amount of Each Receipt this Period 300.00
Name of Employer self-employed	Occupatio dentist		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr Kenneth McDougall			Date of Receipt
Mailing Address 1605 9th Ave SE			10 06 2008
City Jamestown	State ND	Zip Code	Transaction ID: 7182270
FEC ID number of contributing federal political committee.	C	58401-6451	Amount of Each Receipt this Period 200.00
Name of Employer self-employed	Occupatio dentist	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)	1		1250.00

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 44 (check only one) X
or for commercial purposes, NAME OF COMMITTEE	other than using the name and a	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, M Dr Gregory E Phillips Mailing Address 4640	,		Date of Receipt
City Columbus	State IN	Zip Code 47201-9753	Transaction ID: 7182271 Amount of Each Receipt this Period
FEC ID number of contril federal political committee			750.00
Name of Employer self-employed Receipt For: Primary Other (specify)	Occupat dentist Aggrega	ion tte Year-to-Date ▼ 750.00]
Full Name (Last, First, M Dr Charles Lawrence Steff Mailing Address 660 E	el		Date of Receipt 1 0 0 6 2 0 0 8
City	State	Zip Code	Transaction ID: 7182272
Indianapolis FEC ID number of contril federal political committe		46202-6132	Amount of Each Receipt this Period 500.00
Name of Employer self-employed	Occupat dentist	ion	
Receipt For: Primary Other (specify)		tte Year-to-Date ▼ 500.00	
Full Name (Last, First, M Dr Joseph P Crowley Mailing Address 4659	iddle Initial) Farview Ln		Date of Receipt
		7.0.1	10 06 2008
City Cincinnati	State OH	Zip Code 45247-6927	Transaction ID: 7182273 Amount of Each Receipt this Period
FEC ID number of contril federal political committee			500.00
Name of Employer self-employed	Occupat dentist	ion	
Receipt For: Primary Other (specify) ▼		tte Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts Th	nis Page (optional))	1750.00

ercial purposes, other than using the FCOMMITTEE (In Full) In Dental Political Action Come (a) (Last, First, Middle Initial) I H Halasz (b) Gress 9146 Beacon Light Ct Ille umber of contributing (b) Itical committee. Employer (b) General (c) (Last, First, Middle Initial) (c) (Schechner (d) General (d) General (d) General (e) (Specify) (e) (Last, First, Middle Initial)	State OH C Occupation dentist Aggregate State IN C Occupation	Zip Code 45458-3638	Date of Receipt Date of Receipt Transaction ID: 7182274 Amount of Each Receipt this Period Date of Receipt Date of Receipt Transaction ID: 7182298 Amount of Each Receipt this Period 500.00
in Dental Political Action Com is (Last, First, Middle Initial) I H Halasz Iddress 9146 Beacon Light Ct Ille umber of contributing litical committee. Employer over over inary General er (specify) is Schechner Iddress 85 Tanglewood Trl so umber of contributing litical committee. Employer or: nary General er (specify) is Schechner Iddress 85 Tanglewood Trl so umber of contributing litical committee. Employer oyed	State OH C Occupation dentist Aggregate IN C Occupation	45458-3638 Year-to-Date ▼ 500.00 Zip Code	Transaction ID: 7182274 Amount of Each Receipt this Period Date of Receipt M M / D D / Y Y Y O 8 500.00 Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ille umber of contributing litical committee. Employer or: nary General er (specify) (Last, First, Middle Initial) is Schechner ddress 85 Tanglewood Trl SO umber of contributing litical committee.	State OH C Occupatior dentist Aggregate IN C Occupatior	45458-3638 Year-to-Date ▼ 500.00 Zip Code	Transaction ID: 7182274 Amount of Each Receipt this Period Date of Receipt M M / D D / Y Y Y O 8 500.00 Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ille umber of contributing litical committee. Employer over over over over over over over ov	State OH C Occupatior dentist Aggregate IN C Occupatior	45458-3638 Year-to-Date ▼ 500.00 Zip Code	Date of Receipt M M M O 6 2008 Transaction ID: 7182274 Date of Receipt M M M O 6 2008 Transaction ID: 7182298 Amount of Each Receipt this Period
umber of contributing litical committee. Employer over over or: nary General er (specify) a (Last, First, Middle Initial) a Schechner ddress 85 Tanglewood Trl so umber of contributing litical committee. Employer oved	Occupation dentist Aggregate State IN C	Year-to-Date ▼ 500.00 Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Employer oved or: nary General er (specify) e (Last, First, Middle Initial) i Schechner ddress 85 Tanglewood Trl so umber of contributing litical committee. Employer oved	Occupation dentist Aggregate State IN C	Year-to-Date ▼ 500.00 Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
or: nary General er (specify) (a) (Last, First, Middle Initial) (b) (Schechner (ddress 85 Tanglewood Trl (so) umber of contributing (litical committee.)	State IN C Occupation	Year-to-Date ▼ 500.00 Zip Code	Transaction ID: 7182298 Amount of Each Receipt this Period
General er (specify) (Last, First, Middle Initial) Schechner ddress 85 Tanglewood Trl SO umber of contributing litical committee.	State IN C	500.00 Zip Code	Transaction ID: 7182298 Amount of Each Receipt this Period
schechner ddress 85 Tanglewood Trl so umber of contributing litical committee. Employer oyed	C Occupation	·	Transaction ID: 7182298 Amount of Each Receipt this Period
SO umber of contributing litical committee. Employer oyed	C Occupation	·	Transaction ID: 7182298 Amount of Each Receipt this Period
umber of contributing litical committee. Employer oyed	C Occupation	·	Amount of Each Receipt this Period
umber of contributing litical committee. Employer oyed	C Occupation	46385-8942	
Employer oyed	Occupation		500.00
	dentist	1	
or: nary General er (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
e (Last, First, Middle Initial) W Fields, Jr			Date of Receipt
ddress 4066 Fenwick Rd			10 06 2008
	State	Zip Code	Transaction ID: 7182300
US	OH	43220-4870	Amount of Each Receipt this Period
umber of contributing litical committee.	С		500.00
Employer byed	Dental Sc	chool Faculty	
or: nary General er (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
			1500.00
	Employer byed or: nary General	US OH Lumber of contributing litical committee. Employer oyed Occupation Dental Scor: hary General er (specify) ▼ OH Aggregate	US OH 43220-4870 Cumber of contributing litical committee. Employer open Dental School Faculty Or: Aggregate Year-to-Date ▼ FOO OO

SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 44 (check only one) X
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Dental Political Action Com	mittee		
	Full Name (Last, First, Middle Initial) Dr Steven C Hollar			Date of Receipt
	Mailing Address 1632 S Woodfield Trl			10 06 7 2008
	City Warsaw	State IN	Zip Code 46580-5819	Transaction ID: 7182301 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupatio dentist	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Dr Kim L Gardner			Date of Receipt
	Mailing Address 11710 Butternut Rd			10 06 YYYYY 1000 1000 1000 1000 1000 100
	City	State	Zip Code	Transaction ID: 7182303
	Chardon	OH	44024-9357	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer self-employed	Occupatio dentist	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
	Full Name (Last, First, Middle Initial) Dr Michael A Abbott	_		Date of Receipt
	Mailing Address 344 Augusta Dr			10 06 2008
	City	State	Zip Code	Transaction ID: 7182320
	Abingdon FEC ID number of contributing federal political committee.	C	24211-3804	Amount of Each Receipt this Period 750.00
	Name of Employer self-employed	Occupatio dentist	n	
	Receipt For: Primary General Other (specify)	+ +	e Year-to-Date ▼ 750.00	
Г	SUBTOTAL of Receipts This Page (optional)	1		1550.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Dental Political Action C	and Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr Kirk Norbo		Date of Receipt
Mailing Address PO Box 355		10 06 2008
City	State Zip Code	Transaction ID: 7182398
Waterford	VA 20197-0355	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation Dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Robert G Plage		Date of Receipt
Mailing Address 807 Wood Cove R	Rd	10 05 2008
City	State Zip Code	Transaction ID: 7182400
Wilmington	NC 28409-0504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Gus C Vlahos		Date of Receipt
Mailing Address PO Box 1379		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Dublin	State Zip Code VA 24084-1379	Transaction ID: 7182402 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer self-employed	Occupation Dentist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (option	nal)	1750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 44 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Dental Political Action Co	d Statements may not be sold or used by any pers the name and address of any political committee to emmittee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr Robert P Hollowell, Jr Mailing Address 101 Glenspring Way	у	Date of Receipt 1 0 0 6 2 0 0 8
City <u>Morrisville</u>	State Zip Code NC 27560-6994	Transaction ID: 7182405 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation Dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Charles H Norman, III		Date of Receipt
Mailing Address 2012 Pembroke Rd		10 06 YYYY 10 06 2008
City	State Zip Code	Transaction ID: 7182408
Greensboro	NC 27408-6330	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Dr Charles Lynum Cuttino, III Mailing Address 512 Welwyn Rd	,	Date of Receipt
Mailing Address 512 Welwyn Rd		10 06 7 2008
City <u>Richmond</u>	State Zip Code VA 23229-8106	Transaction ID: 7182411
FEC ID number of contributing federal political committee.	C 23229-0100	Amount of Each Receipt this Period 200.00
Name of Employer self-employed	Occupation Dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
)	1450.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Dental Political Action Co	mmittee	
Full Name (Last, First, Middle Initial) Dr H Fred Howard		Date of Receipt
Mailing Address PO Box 842		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 7182418
<u>Harlan</u>	KY 40831-0842	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr William E Lee		Date of Receipt
Mailing Address 1883 Fort Harrods [)r	10 06 2008
City	State Zip Code	Transaction ID: 7182422
<u>Lexington</u>	KY 40503-5406	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr Richard D Barnes		Date of Receipt
Mailing Address 5256 River Club Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 7182423
Suffolk	VA 23435-3529	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed dentist	Occupation Dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (ontional)	1300.00
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line numl	·	1300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Dental Political Action C	nd Statements may not be sold or used by any pers g the name and address of any political committee to ommittee	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr Charles L. Smith Mailing Address 1501 7th Avenue		Date of Receipt 10 06 2008
City Charleston	State Zip Code WV 25312-2305	Transaction ID: 7182424 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Dr David Miskel Eller		Date of Receipt
Mailing Address 5187 Route 60		10 06 2008
City	State Zip Code	Transaction ID: 7182427
<u>Huntington</u>	WV 25706	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr Thomas W Leslie		Date of Receipt
Mailing Address 4759 Cold Run Val	ley Rd	10 06 2008
City Berkeley Springs	State Zip Code WV 25411-4634	Transaction ID: 7182428
FEC ID number of contributing federal political committee.	C 25411-4634	Amount of Each Receipt this Period 750.00
Name of Employer self-employed	Occupation Full Time Practice (>30 Hrs/week)	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
CURTOTAL of Possible This Posse ()	al)	1800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Dental Political Action Comn	nittee		
Full Name (Last, First, Middle Initial) Dr William M Litaker, Jr			Date of Receipt
Mailing Address 1092 13th Ave NW			10 06 2008
City	State	Zip Code	Transaction ID: 7182430
Hickory	NC	28601-2316	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self-employed	Occupatio dentist	n	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0 0	Date of Resolut
Dr James William Mc Daniel Mailing Address 1201 Rocky Dell Ln			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Signal Mountain	State TN	Zip Code 37377-3371	Transaction ID: 7182436 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self-employed	Occupatio dentist	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Morris L Robbins, Jr			Date of Receipt
Mailing Address Unit 303 585 S Greer St			10 06 7 2008
City	State	Zip Code	Transaction ID: 7182438
Memphis	TN	38111-3206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self-employed	Occupatio dentist	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1500.00

Ī	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and St	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
7	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Dental Political Action Comm	name and ad	dress of any political committee to	solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr Elizabeth A Jabbour Mailing Address 350 Briarwood Rd			Date of Receipt
	City	Ctata	7in Codo	10 06 2008
	City Spartanburg	State SC	Zip Code 29301-2937	Transaction ID: 7182449 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer self-employed	Occupation Dentist	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
- В.	Full Name (Last, First, Middle Initial) Dr James A Harrell, Jr			Date of Receipt
	Mailing Address 480 Hawthorne Rd			10 06 2008
	City Elkin	State NC	Zip Code	Transaction ID: 7182452
	FEC ID number of contributing federal political committee.	C	28621-3023	Amount of Each Receipt this Period 750.00
	Name of Employer self-employed	Occupatio dentist	on	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
_ C.	Full Name (Last, First, Middle Initial) Dr Douglas A Wyckoff			Date of Receipt
	Mailing Address 8992 NW Barwick Dr			10 06 YYYY 2008
	City	State	Zip Code	Transaction ID: 7182454
	Cameron	MO	64429-7537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupation dentist	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			2000.00
_				-

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19/44 (check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Dental Political Action Co	ommittee		
Full Name (Last, First, Middle Initial) Dr Nona I Breeland			Date of Receipt
Mailing Address 1506 E. Franklin St	treet		10 06 2008
City	State	Zip Code	Transaction ID: 7182456
Chapel Hill	NC	27514-2825	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self-employed	Occupation dentist	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Mark R Zust	l		Date of Receipt
Mailing Address 14005 Eagle Manor	r Ct		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 7182457
Chesterfield	MO	63017-2686	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		800.00
Name of Employer self-employed	Occupation dentist	n	
Receipt For:	Aggregate	Year-to-Date	
Primary General Other (specify) ▼	0 0	800.00	
Full Name (Last, First, Middle Initial) Dr Bettie R Mc Kaig			Date of Receipt
Mailing Address 2425 Argyle Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 7182458
Raleigh	NC	27609-7663	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		750.00
Name of Employer self-employed	Occupation dentist	n	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	750.00	
			2050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 44 (check only one) X 11a
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)		y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Dental Political Action Comr	nittee		
Full Name (Last, First, Middle Initial) Dr Shanon T Kirchhoff			Date of Receipt
Mailing Address 1589 County Road 618	3		10 06 2008
City	State	Zip Code	Transaction ID: 7182460
Cape Girardeau	MO	63701-9219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer self-employed	Occupation dentist	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Francis A Connor, Jr			Date of Receipt
Mailing Address 81 Wampanoag Cir			10 06 7 2008
City <u>North Kingstown</u>	State RI	Zip Code 02852-5746	Transaction ID: 7182464 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self-employed	Occupation dentist	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Edwin S Mehlman			Date of Receipt
Mailing Address 3 Hanley Farm Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 7182471
Warren	RI	02885-4376	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self-employed	Occupation dentist	on	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1200.00

Any information copied from such Reports and Statements may not be sold or for commercial purposes, other than using the name and address of any NAME OF COMMITTEE (In Full) American Dental Political Action Committee Full Name (Last, First, Middle Initial) Dr Milton A Glicksman Mailing Address 49 State Road Nauset City State Zip Co Dartmouth MA 02747 FEC ID number of contributing federal political committee. Name of Employer self-employed dentist Receipt For: Primary General Other (specify) Other (specify) Full Name (Last, First, Middle Initial) Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Cccupation Dentist	Date of Receipt 1 0 0 6 2 0 0 8 Transaction ID: 7182472
or for commercial purposes, other than using the name and address of any NAME OF COMMITTEE (In Full) American Dental Political Action Committee Full Name (Last, First, Middle Initial) Dr Milton A Glicksman Mailing Address 49 State Road Nauset City State Zip Co Dartmouth MA 02747 FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Cccupation Dentist	Date of Receipt Date of Receipt
American Dental Political Action Committee Full Name (Last, First, Middle Initial) Dr Milton A Glicksman Mailing Address 49 State Road Nauset City State Zip Co Dartmouth MA 02747 FEC ID number of contributing federal political committee. Name of Employer self-employed Coccupation dentist Receipt For: Aggregate Year-to-Da Primary General Other (specify) CHAPTER STATE ST	Transaction ID: 7182472 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Dr Milton A Glicksman Mailing Address 49 State Road Nauset City State Zip Co Dartmouth MA 02747 FEC ID number of contributing federal political committee. Name of Employer Self-employed General Other (specify) Primary General Other (specify) Other (specify) Tull Name (Last, First, Middle Initial) Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer Self-employed Occupation Dentist	Transaction ID: 7182472 Amount of Each Receipt this Period
Dr Milton A Glicksman Mailing Address 49 State Road Nauset City State Zip Co Dartmouth MA 02747 FEC ID number of contributing federal political committee. Name of Employer self-employed Ccupation dentist Receipt For: Aggregate Year-to-Da Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation Dentist	Transaction ID: 7182472 Amount of Each Receipt this Period
City State Zip Co Dartmouth MA 02747 FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation dentist Receipt For: Aggregate Year-to-Da Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation Dentist	tode Transaction ID: 7182472 Amount of Each Receipt this Period
Dartmouth FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation Dentist	Transaction ID: 7182472 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation Dentist	
federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation Dentist	300.00
self-employed dentist Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation Dentist	
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation Dentist	
Full Name (Last, First, Middle Initial) Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation Dentist	
Dr David Roy Neumeister Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation Dentist	300.00
Mailing Address 1046 Western Avenue City State Zip Co Brattleboro VT 05301 FEC ID number of contributing federal political committee. C Name of Employer self-employed Occupation Dentist	Date of Receipt
Brattleboro VT 05301 FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation Dentist	10 06 2008
FEC ID number of contributing federal political committee. Name of Employer self-employed Occupation Dentist	
rederal political committee. Name of Employer Self-employed Occupation Dentist	-7144 Amount of Each Receipt this Period
self-employed Dentist	500.00
D	
Receipt For: Primary General Aggregate Year-to-Da	ute ▼
Other (specify) ▼	500.00
Full Name (Last, First, Middle Initial) Dr Joseph E Sokolowski	Date of Receipt
Mailing Address 1821 Greenbough Ct	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Co	
Saint Louis MO 63146	S-6001 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	300.00
Name of Employer Self-employed Occupation dentist	
Receipt For: Primary General Other (specify)	ate ▼ 300.00
SUBTOTAL of Receipts This Page (optional)	

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full) American Dental Political Action	rts and Statements may not be sold or used by any persusing the name and address of any political committee on Committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr Kenneth J Weinand Mailing Address 2309 S Arrowh	ead Ave	Date of Receipt
City Independence	State Zip Code MO 64057-1951	Transaction ID: 7182484 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation dentist Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Dr Robert E Butler Mailing Address 10014 Canterb	ury Farms Ct	Date of Receipt
City	State Zip Code	1 0 0 6 2 0 0 8 Transaction ID: 7182485
Saint Louis	MO 63128-3278	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Daniel R Menze		Date of Receipt
Mailing Address 1121 Timberlin	e Rd	10 06 2008
City	State Zip Code	Transaction ID: 7182487
Moberly FEC ID number of contributing federal political committee.	MO 65270-2928	Amount of Each Receipt this Period 500.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (o	otional)	1750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 44 (check only one) X 11a 11b 11c 12
Any information copied from such Reports a	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions of solicit contributions from such committee
NAME OF COMMITTEE (In Full) American Dental Political Action C		Solicit Contained and Horn South Continued.
Full Name (Last, First, Middle Initial) Dr Gary Donald Oyster		Date of Receipt
Mailing Address 597 Beechwood R	oad	10 06 2008
City	State Zip Code	Transaction ID: 7182493
Franklinton FEC ID number of contributing federal political committee.	NC 27525-9106	Amount of Each Receipt this Period 750.00
Name of Employer self-employed	Occupation dentist	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Dr Kent N Tucker		Date of Receipt
Mailing Address PO Box 699		10 06 2008
City <u>Pilot Mountain</u>	State Zip Code NC 27041-0699	Transaction ID: 7182824 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Gavin Gibbs Harrell		Date of Receipt
Mailing Address 834 Claremont Dr	ive	10 06 2008
City Elkin	State Zip Code NC 28621-2449	Transaction ID: 7182830 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation dentist	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	nal)	1750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 44 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Dental Political Action Co	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr Wilson O Kelly Jewell Mailing Address 5012 Crown Point I	Lane		Date of Receipt
City Wilmington FEC ID number of contributing	State NC	Zip Code 28409-3298	Transaction ID: 7182831 Amount of Each Receipt this Period
Name of Employer self-employed Receipt For:	Occupatio dentist Aggregate	n e Year-to-Date ▼	500.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr Rodney J Klima	0 0	500.00	Date of Receipt
Mailing Address 9807 Flintridge Ct			10 06 2008
City Fairfax	State VA	Zip Code	Transaction ID: 7182832
FEC ID number of contributing federal political committee.	C	22032-1724	Amount of Each Receipt this Period 750.00
Name of Employer self-employed	Occupatio Full Time	n e Practice (>30 Hrs/week)	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Dr Bruce R Hutchison	1		Date of Receipt
Mailing Address 5217 Glen Meadow	/ Rd		10 06 2008
City	State	Zip Code	Transaction ID: 7182834
Centreville	VA	20120-1355	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self-employed	Occupatio dentist		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		1750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 44 (check only one) X
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant he name and address of any political committee to	
American Dental Political Action Co Full Name (Last, First, Middle Initial) Dr Ralph L Howell, Jr	mmittee	Date of Receipt
Mailing Address 117 Sleepy Ridge Control City	State Zip Code	Transaction ID: 7182835
Suffolk FEC ID number of contributing federal political committee.	VA 23435-1357	Amount of Each Receipt this Period 500.00
Name of Employer self-employed Receipt For: Primary General Other (specify) ▼	Occupation Full Time Practice (>30 Hrs/week) Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Mckinley L Price Mailing Address 938 Shore Dr		Date of Receipt 10 06 2008
City	State Zip Code	Transaction ID: 7182836
Newport News	VA 23607-6435	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Alonzo M Bell		Date of Receipt
Mailing Address 1026 W Taylor Run	Pkwy	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Alexandria	State Zip Code VA 22302-3912	Transaction ID: 7182837 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional))	1500.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Dental Political Action Con	nmittee		
Α.	Full Name (Last, First, Middle Initial) Dr Douglas S Rawls			Date of Receipt
	Mailing Address 704 S Main St City	State	Zip Code	10 06 2008
	Summerville	SC	29483-5912	Transaction ID: 7182838 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	500.00
	Name of Employer self-employed	Occupation Full Time	e Practice (>30 Hrs/week)	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
– В.	Full Name (Last, First, Middle Initial) Dr John J Sanders			Date of Receipt
	Mailing Address 153 Brandywine Dr			10 06 2008
	City	State	Zip Code	Transaction ID: 7182839
	Summerville	SC	29485-8019	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupation dentist	on	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
с. С.	Full Name (Last, First, Middle Initial) Dr Michael D Eggnatz			Date of Receipt
	Mailing Address 10860 Santa Fe Dr			10 06 2008
	City	State	Zip Code	Transaction ID: 7182847
	Hollywood	FL	33026-4958	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self-employed	Occupation dentist	on	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		500.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
t	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 44 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any person ress of any political committee to	
American Dental Political Action Com	ımittee		
Full Name (Last, First, Middle Initial) Dr Wade G Winker			Date of Receipt
Mailing Address 220 Eastridge Dr			10 06 2008
City	State	Zip Code	Transaction ID: 7182849
Eustis	<u>FL</u>	32726-7639	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self-employed	Occupation dentist	1	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Dr Samuel B Low			Date of Receipt
Mailing Address 4955 SW 91st Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 7182850
Gainesville	FL	32608-7186	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		750.00
Name of Employer Self-employed	Occupation Dentist	1	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]
Full Name (Last, First, Middle Initial) Dr Daniel A Bertoch			Date of Receipt
Mailing Address 4401 Carrollwood Villa	age Drive		10 06 2008
City	State	Zip Code	Transaction ID: 7182852
<u>Tampa</u>	<u>FL</u>	33618-8638	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		750.00
Name of Employer Self-employed	Occupation dentist	1	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional) .		\	2000.00

	EDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 44 (check only one) X 11a
or for o	formation copied from such Reports and S commercial purposes, other than using the ME OF COMMITTEE (In Full) nerican Dental Political Action Comi	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Dr	I Name (Last, First, Middle Initial) Kim U Jernigan iling Address 1304 Creek Bridge Rd			Date of Receipt 1 0 0 6 7 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
City		State	Zip Code	Transaction ID: 7183142
FE	nsacola C ID number of contributing eral political committee.	FL C	32514-1685	Amount of Each Receipt this Period 500.00
	me of Employer If-employed ceipt For: Primary General Other (specify)	Occupation dentist Aggregate	e Year-to-Date ▼	1
Dr Dr	I Name (Last, First, Middle Initial) Betty N Hughes iling Address 940 41st Ave N	0 0		Date of Receipt
City	d.	State	Zip Code	1 0 0 6 2 0 0 8 Transaction ID: 7183145
	int Petersburg	FL	33703-4528	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		200.00
Na Se	me of Employer f-employed	Occupatio Dentist	n	
Rec	ceipt For: Primary General Other (specify) ♥		e Year-to-Date ▼ 400.00	
	I Name (Last, First, Middle Initial) Roger E Wood	1		Date of Receipt
	iling Address 10741 Cherokee Rd			10 07 2008
City		State	Zip Code	Transaction ID: 7183152
Mi	dlothian	VA	23113-1310	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		500.00
Na sel	me of Employer f-employed	Occupatio Full Time	n e Practice (>30 Hrs/week)	
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBT	OTAL of Receipts This Page (optional)			1200.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 44 (check only one) X 11a 11b 11c 12
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not g the name and address	be sold or used by any perso s of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Dental Political Action C	ommittee		
Full Name (Last, First, Middle Initial) Dr Brian O Coleman			Date of Receipt
Mailing Address 8527 Sand Lake S	hores Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 7183167
Orlando	FL	32836-6342	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self-employed	Occupation Dentist		7
Receipt For:	Aggregate Yea	ur-to-Date ▼	7
Primary General Other (specify) ▼	0.000	500.00	
Full Name (Last, First, Middle Initial) Dr Teri-Ross Icyda	· ·		Date of Receipt
Mailing Address 3970 NE Joes Poir	nt Rd		10 06 2008
City	State	Zip Code	Transaction ID: 7183170
Stuart	FL	34996-1420	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self-employed	Occupation Dentist		7
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ur-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Richard A Huot			Date of Receipt
Mailing Address 8776 W Orchid Isla	and Cir		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 7183175
Vero Beach	FL	32963-4149	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		750.00
Name of Employer Self-employed	Occupation Dentist		7
Receipt For:	Aggregate Yea	ur-to-Date ▼	
Primary General Other (specify) ▼		750.00	
			1750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 44 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal statements and address of any political committee to	
American Dental Political Action Co	mmittee	
Full Name (Last, First, Middle Initial) Dr Barry P Setzer		Date of Receipt
Mailing Address 9649 Trendle Ln	Otata 7'n Oada	10 06 2008
City Jacksonville	State Zip Code FL 32257-5754	Transaction ID: 7183180 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self-employed	Occupation Dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Michael J Link		Date of Receipt
Mailing Address 4 Assembly Ct	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 7183554
Newport News	VA 23606-2022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self-employed	Occupation Dentist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr Philip H Dixon		Date of Receipt
Mailing Address 431 Fair Ave Nw		10 08 7 9 9 9
City New Philadelphia	State Zip Code OH 44663-1905	Transaction ID: 7190114 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUPTOTAL of Possints This Page (ontional)		1300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 44 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Dental Political Action Cor	nmittee	
Full Name (Last, First, Middle Initial) Dr Idalia Lastra		Date of Receipt
Mailing Address 2001 SW 4th Ave		10 08 2008
City	State Zip Code	Transaction ID: 7190115
<u>Miami</u>	FL 33129-1302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self-Employed	Occupation Dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Bruce D Grbach		Date of Receipt
Mailing Address 9203 Mentor Avenue		10 08 7 2008
City	State Zip Code	Transaction ID: 7190116
Mentor	OH 44060-6477	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer self-employed	Occupation dentist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr James A Karlowicz		Date of Receipt
Mailing Address 1401 Parkdale Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 7190122
Dover	OH 44622-1115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation dentist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
		1300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 44 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Dental Political Action Cor		
Full Name (Last, First, Middle Initial) Dr John N Williams, Jr		Date of Receipt
Mailing Address 84303 Winslow		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 7190123
Chapel Hill	NC 27517-8538	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self-Employed	Occupation Dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr K Jean Beauchamp	Date of Receipt	
Mailing Address 173 E Glenwood Dr	10 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 7190125
Clarksville FEC ID number of contributing federal political committee.	TN 37040-3552	Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr Daniel E Ketteman		Date of Receipt
Mailing Address 207 Loretta Ln		10 08 2008
City	State Zip Code	Transaction ID: 7190126
Godfrey	IL 62035-2456	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and St	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 44 (check only one) X 11a 11b 11c 12 13 14 15 16 17 In for the purpose of soliciting contributions
\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	NAME OF COMMITTEE (In Full) American Dental Political Action Comn	name and ad	dress of any political committee to	solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr Mary J Hayes Mailing Address 2648 N Bosworth Ave			Date of Receipt
	Mailing Address 2648 N Bosworth Ave			10 08 7 2008
	City	State	Zip Code	Transaction ID: 7190127
	Chicago	IL	60614-1108	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupation dentist	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
– В.	Full Name (Last, First, Middle Initial) Dr Susan Bordenave Bishop			Date of Receipt
	Mailing Address 7314 N Edgewild Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 7190130
	<u>Peoria</u>	<u>IL</u>	61614-2114	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer self-employed	Occupation dentist	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
-).	Full Name (Last, First, Middle Initial) Dr Bradley W Barnes			Date of Receipt
	Mailing Address 13775 Benjamin Ct			10 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 7190131
	Bloomington	<u>IL</u>	61704-5143	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupation dentist	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
H				

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 44 (check only one) X 11a
	nd Statements may not be sold or used by any pour the name and address of any political committee	
NAME OF COMMITTEE (In Full) American Dental Political Action C	ommittee	
Full Name (Last, First, Middle Initial) Dr Chauncey Cross		Date of Receipt
Mailing Address 2401 Country Club	Dr	10 08 7 9 9
City	State Zip Code	Transaction ID: 7190132
Springfield	IL 62704-3215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer self-employed	Occupation dentist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr Larry W Osborne	I	Date of Receipt
Mailing Address 710 Stevens Creek	Blvd	10 08 2008
City	State Zip Code	Transaction ID: 7191230
Forsyth	IL 62535-9741	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer self-employed	Occupation dentist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr Darryll L Beard		Date of Receipt
Mailing Address 8507 D Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 7191231
Waterloo	IL 62298-5317	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer self-employed	Occupation dentist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	•

SCHEDULE A (FEC Form : ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 44 (check only one) X
Any information copied from such Reports or for commercial purposes, other than us	and Statements may not be sold or used by any personing the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Dental Political Action	Committee	
Full Name (Last, First, Middle Initial) Dr Thomas J Hartog		Date of Receipt
Mailing Address 1630 Hickory Hill		10 08 2008
City	State Zip Code	Transaction ID: 7191233
Freeport	IL 61032-6622	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation dentist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00]
Full Name (Last, First, Middle Initial) Dr Thomas E Sullivan	Date of Receipt	
Mailing Address 9840 Dickens St	10 08 7 9 9	
City	State Zip Code	Transaction ID: 7191234
Westchester	IL 60154-3713	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer self-employed	Occupation dentist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00]
Full Name (Last, First, Middle Initial) Dr Frank A. Kyle, Jr		Date of Receipt
Mailing Address 3909 Rive Dr		M M / D D / Y Y Y Y Y Y 1 1 0 0 8 2 0 0 8
City	State Zip Code	Transaction ID: 7191241
<u>Alexandria</u>	VA 22309-3053	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer self-employed	Occupation Full Time Practice (>30 Hrs/week)	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
	onal)	1750.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 44 (check only one) X
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	merican Dental Political Action Com	mittee		
. <u>M</u>	ull Name (Last, First, Middle Initial) rs. Kristi Feder			Date of Receipt
	ailing Address 450 NW Gilman Blvd Ste 103	Chaha	7:n Oada	10 14 2008
Ci Is	ty saquah	State WA	Zip Code 98027-2483	Transaction ID: 7222264 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	30027-2403	250.00
Na	ame of Employer	Occupatio	n	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
. <u>D</u> r	ull Name (Last, First, Middle Initial) r Daniel Keith Cheek	<u> </u>		Date of Receipt
Ma	ailing Address 24 Sinnott Cir	10 14 2008		
Ci	•	State	Zip Code	Transaction ID: 7222284
	urham	NC	27713-2325	Amount of Each Receipt this Period
fee	EC ID number of contributing deral political committee.	C		500.00
Na se	ame of Employer elf-employed	Occupatio dentist	n	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	ull Name (Last, First, Middle Initial) elvin Chou	1		Date of Receipt
_	ailing Address FI 2 1937 N Lincoln Ave			10 14 2008
Ci	ty hicago	State IL	Zip Code 60614-5403	Transaction ID: 7243438 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	00014-3403	5.00
Na	ame of Employer	Occupatio <none></none>	n	
Re	eceipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 205.00	
	TOTAL of Receipts This Page (optional)	1		755.00

A.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 37 / 44 Use separate schedule(s) (check only one) for each category of the 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Dental Political Action Committee Full Name (Last, First, Middle Initial) Mrs. Constance Karlowicz Date of Receipt Mailing Address 420 Reeves Avenue 10 8 0 2008 Suite A City State Zip Code Transaction ID: 7495248 Dover OH 44622-2162 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer James Karlowicz, DDS Occupation dental assistant Receipt For: Aggregate Year-to-Date Primary General 250.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	250.00
TOTAL This Period (last page this line number only)	•	46555.00

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 38 / 44
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	13 14 15 16 17
	ny information copied from such Reports and State for commercial purposes, other than using the nar			
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Dental Political Action Committ	tee		
	Full Name (Last, First, Middle Initial) North Carolina Dental PAC			Date of Receipt
	Mailing Address PO Box 4099			10 08 2008
	City	State	Zip Code	Transaction ID: 7190108
	Cary	NC	27519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		220.00
	Name of Employer	Occupation	n	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 52160.00	

SUBTOTAL of Receipts This Page (optional)	•	220.00
TOTAL This Period (last page this line number only)	•	220.00

S	CHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 39 / 44								
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)	1c \square	12					
			Detailed Summary Page	13 14	· H	5 X	16	17			
	ny information copied from such Reports and Statem for commercial purposes, other than using the name										
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)										
\rangle	American Dental Political Action Committe	ee									
	Full Name (Last, First, Middle Initial) Halvorson for Congress			Date of Receip	pt						
	Mailing Address PO Box 176			1 0	08	Y Y 2	0 0 8				
	City	State	Zip Code	Transaction II	D : 7190	111					
	Crete	IL	60417	Amount of Eac	ch Receip	pt this P	eriod				
	FEC ID number of contributing federal political committee.	C Coo	0440016			7:	22.00				
	Name of Employer O	Occupation	n								
	Receipt For: 2007 Primary X General Other (specify) ▼	Aggregate	Year-to-Date ▼ 722.00	Refund from ution	ADPAC	contrib)-				

SUBTOTAL of Receipts This Page (optional)	•	722.00
TOTAL This Period (last page this line number only)	•	722.00

SCHEDULE B (FEC Form 3X)

П	ELUSED DISCUSSION	Use separate schedule(s)			only o		40 / 44				
_	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21	b 📋	22 28a	X 23 28b	\sqcup	24 28c	25 29	2 3
	y Information copied from such Reports and Stater for commercial purposes, other than using the named NAME OF COMMITTEE (In Full)										
V	American Dental Political Action Committee	9 e									
•	Full Name (Last, First, Middle Initial) Andre Carson For Congress Mailing Address One North Capitol Stree	t #211					ction ID Disburs	semen		3 2 0 0 8	3 Y
	City Indianapolis	State Zip Code IN 46204				Amoun	t of Eac	h Disb	ursem	ent this f	eriod
	Purpose of Disbursement Sent to Dr. Stephen Towns Candidate Name Andre Carson		Ca	011 ategory						2000.0)
		ement For: 2007 Primary X General Other (specify)		Type		Sent to	Dr. St	ephei	n Tow	rns	
	Full Name (Last, First, Middle Initial) Schmidt For Congress Committee Mailing Address 771 Wards Corner Rd									6 Ž 0 Ŏ 8	3 Y
	City Loveland Purpose of Disbursement	State Zip Code OH 45140				Amoun	t of Eac	h Disb		ent this I	
	Sent to Dr. Mike Schaeffer Candidate Name Rep. Jean Schmidt		Ca	011 ategory Type				•			
	Office Sought: X House Disburs	ement For: 2007	•			Sent to	Dr. Mi	ike So	chaeff	er	
	Senate President State: OH District: 02	Primary X General Other (specify) ▼	l								
	Senate President	→ ' □	l			Date of	ction IC	semen			
	Senate President State: OH District: 02 Full Name (Last, First, Middle Initial)	→ ' □	l				Disburs			1 2 0 0 8	Y
	Senate President State: OH District: 02 Full Name (Last, First, Middle Initial) Steve Cohen For Congress	→ ' □				Date of	Disburs	emen	t / Y		
	Senate President State: OH District: 02 Full Name (Last, First, Middle Initial) Steve Cohen For Congress Mailing Address 349 Kenilworth City Memphis Purpose of Disbursement Sent to Dr. Morris Robbins	Other (specify) ▼ State Zip Code		011		Date of	Disburs	emen	t Y	ž 0 ŏ 8	Perioc
	Senate President State: OH District: 02 Full Name (Last, First, Middle Initial) Steve Cohen For Congress Mailing Address 349 Kenilworth City Memphis Purpose of Disbursement	Other (specify) ▼ State Zip Code	Ce	011 ategory/ Type		Date of	Disburs	emen	t Y	Y O O E	Perioc
	Senate President President State: OH District: 02 Full Name (Last, First, Middle Initial) Steve Cohen For Congress Mailing Address Mailing Address Address Senate President Steve Cohen For Congress Mailing Address Address Address Senate President Steve Cohen For Congress Mailing Address Address Address Address Senate President Senate	Other (specify) ▼ State Zip Code	Ca	ategory		Date of	Disburs	o 1	t / Y	2 0 0 8 ent this F	Period

В.

C.

SCHEDULE B (FEC Form 3X)		arate schedule(s)			-	INE NUMBER: PAGE 4				41 /	44		
ITEMIZED DISBURSEMENTS		category of the Summary Page		Ė	21b 27	Á	22 28a	X	23 28b	24 280		25 29	26 30b
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American Dental Political Action Committee	ее												
Full Name (Last, First, Middle Initial) Duncan For Congress									on ID:	7172 ement	003		
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City Knoxville	State TN	Zip Code 37901					Amou	int of	f Each	Disburs	emer	nt this	Period
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State: TN District: 02 Full Name (Last, First, Middle Initial)				_						7470			
David Price for Congress							Date of		sburse			/	V
Mailing Address PO Box 1986							1 0	IVI .	0	2 /	2	žοŏ	B '
City Raleigh	State NC	Zip Code 27602					Amou	int of	f Each	Disburs			
Purpose of Disbursement Check sent to Dr. Alec Parker for event 10/05/08					11			0			3	000.0	0
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Mailing Address PO Box 45444							1 0		0	Ž	2	žοŏ	3
City Phoenix	State AZ	Zip Code 85064					Amou	int of	f Each	Disburs			
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Candidate Name Rep. John B. Shadegg					egory/ ype								
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SUBTOTAL of Disbursements This Page (optional)					▶		<u></u>	_	-		/(0.00	Ų

SCHEDULE B (FEC Form 3X)

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	y Information copied from such Reports and or commercial purposes, other than using the												
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_	Full Name (Last, First, Middle Initial)					Trans	acti	on ID	· 71	1953	86		
	Waters for office					Date of		sburs	emen			Y	Υ
	Mailing Address 10124 South Broad Suite 1	way				10			9	L	2	o ŏ 8	
	City Los Angeles	State Zip Code CA 90003				Amou	nt of	Each	Disk	ourse	-		
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	Candidate Name Maxine Waters		С	ateg Typ									
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	State: CA District: 35 Full Name (Last, First, Middle Initial)					Trans	anti	on ID	. 71	1052	00		
	Jerry Lewis for Congress Committee					Date of	of Di		emen			V	V
	Mailing Address 2112 Rayburn Hou	se Office Building				1 [™] 0	M	C	9	/ L	ž	0 ŏ 8	Y
	City Washington	State Zip Code DC 20515				Amou	nt of	Each	Dist	ourse	ment	this P	erio
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	Candidate Name Jerry Lewis		C	ateg Typ	,								
	Office Sought: X House Senate President State: CA District: 41	sbursement For: 2007 Primary X Genera Other (specify)	-			Check Ehrlei		nt to	Dr. (Clela	n		
	Full Name (Last, First, Middle Initial) Fattah For Congress					Trans	of Di	sburs	emen				
	Mailing Address 3900 Ford Road St	iite 12-O				1 0	M	D C	9	/ L	ž	0 ŏ 8	Y
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	Candidate Name Rep. Chaka Fattah			ateg Typ									
	Office Sought: X House Senate President State: PA District: 02	sbursement For: 2007 Primary X Genera Other (specify)	1			Check nnifer ent 09	se Fis 9/22	nt to her a /08	Can tten	npaig ded (gn-Jo ev-	e -	
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SCHEDULE B (FEC Form 3X)

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	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	<u> </u>	23 28b	24 28		25 29	20
	ny Information copied from such Reports and Staten for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)											
V	American Dental Political Action Committee	ee										
	Full Name (Last, First, Middle Initial) Robert Wexler for Congress Cmte.					Date o		burse	7195 ment 9		2 0 ŏ 8	Y
	Mailing Address 2500 N. Military Trail Ste. 288											
	City Boca Raton	State Zip Code FL 33431				Amou	nt of I	Each	Disbur	semer	nt this P	eriod
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	Robert Wexler Office Sought: X House Senate President State: FL District: 19	ement For: 2007 Primary X General Other (specify)		Туре		Check rner	(sen	it to [Dr. Pa	ul We	9-	
	Full Name (Last, First, Middle Initial) Hoosiers Supporting Buyer For Congress							burse	ment		2 0 0 8	Y
	Mailing Address 200 North Main St. P.O.	Box 712				1 0		0	9		2008	
	City Monticello	State Zip Code IN 47960				Amou	nt of I	Each	Disbur		nt this P	-
	Purpose of Disbursement Check sent to Dr. Raymond Maddox Candidate Name Rep. Steve Buyer		Ca	011 atego Type	ory/				•			
	Office Sought: X House Disburse Senate President State: IN District: 04	ement For: 2007 Primary X General Other (specify)				Check Madde	sen ox	t to [Or. Ra	ymor	nd	
	Full Name (Last, First, Middle Initial) Fattah For Congress					Trans Date o	of Dis	burse	ment			
	Mailing Address 3900 Ford Road Suite 12	2-0				1 ^M 0	M /	^D 1	3 /	YZ	8 ó o	Y
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District: 07

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full) American Dental Political Action Committee	ee		
Full Name (Last, First, Middle Initial)			Transaction ID: 7202292
Tim Johnson For South Dakota, Inc.			Date of Disbursement
Mailing Address PO Box 1859			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Sioux Falls	SD 57101		5000.00
Purpose of Disbursement Check sent to Dr. Mel Thaler		011	3000.00
Candidate Name	l	Category/	
Tim Johnson		Type	
X Senate President	ement For: 2007 Primary X General Other (specify)		Check sent to Dr. Mel Tha- ler
State: SD District:			
Full Name (Last, First, Middle Initial) A Whole Lot Of People For Grijalva Cond	ressional C		Transaction ID: 7202294 Date of Disbursement
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City	State Zip Code		Amount of Each Disbursement this Period
Tucson	AZ 85702		2000.00
Purpose of Disbursement Check delivered by Kathleen Ford		011	3000.00
Candidate Name Rep. Raul M. Grijalva		Category/ Type	
Office Sought: X House Disburs Senate President	ement For: 2007 Primary X General Other (specify)		Check delivered by Kathle- en Ford

SUBTOTAL of Disbursements This Page (optional)	•	8000.00
TOTAL This Period (last page this line number only)	•	37000.00

State: AZ